

# Details about your Flex Benefit Debit Card

The Flex Benefit Debit Card is a convenient way to access your FSA or HRA funds at the point of sale rather than submitting a paper claim and waiting for reimbursement. You can use it to pay for office visit and prescription co-pays, health insurance deductibles and qualified over-the-counter expenses.



## What you should know:

- The Flexible Benefit Debit Card draws funds directly from your current FSA or HRA account.
- It should only be used for expenses that you and your dependents incur within this plan year. For example: It can not be used to pay for a service that was incurred in a prior plan year that you have been billed for in this plan year.
- A service must be rendered before payment can be made with the Benefit Card.
- Do not throw away your Benefit Card at the end of the plan year. The card has an expiration date. It remains valid until that date as long as you continue to participate in an FSA or HRA account.

## What to expect:

When you use your debit card, keep your documentation for the purchase just like you would if you were going to submit a paper claim for reimbursement. Here is what to expect when using your Flexible Benefits Debit Card:



### Over-the-Counter Expenses

(FSA Account Only)

If you make an eligible over-the-counter purchase at a pharmacy or supermarket that participates with the IIAS<sup>1</sup> system, the system will automatically process your expenses when you swipe your card. The system will approve payment for the items that are eligible and will reject those that are ineligible.

**Eligible:** If your items are approved by the system at the point of purchase, you will not be asked to provide us with documentation. However, it is still important to keep receipts for your own records for tax purposes.

**Ineligible:** If an item is rejected as ineligible, the cashier will ask you to use another form of payment. If the item that was rejected is in fact eligible, you can submit a reimbursement request.

If you try to make an over-the-counter purchase at a supermarket or pharmacy that does not have the IIAS system in place or when making a purchase for an over-the-counter medicine, the debit card will not work. You will need to submit a reimbursement request to CSLLC for the purchase. For over-the-counter medicine, you must also include a copy of the prescription from your physician. You can download the form from our website [http://www.combinedservices.com/docs/FSA\\_Claim.pdf](http://www.combinedservices.com/docs/FSA_Claim.pdf).

#### More ways to send us documentation for Benefit Card Purchases:

1. Mail with our request to: PO Box 1320, Concord, NH 03302
2. Fax with our request to: 1 603 224-0230
3. Scan documentation & upload through the consumer portal
4. Using our mobile app, snap a photo of documentation

<sup>1</sup>IIAS - Is a point of sale technology used by non-health care retailers (ex. pharmacies, discount stores, supermarkets) that approves or rejects items purchased based on their eligibility according to IR Code Section 213(d). For more details or to see a list of retailers who participate with IIAS, visit [www.sig-is.org](http://www.sig-is.org).

<sup>2</sup>Automated email - If you have not provided us with your email address for correspondence, a letter will be mailed to your home address.

### Provider Visit & Prescription Payments

(FSA and HRA Accounts)

If you use the Flexible Benefit Debit Card for a co-payment for an office visit or prescription and the amount paid matches what your employer's health plan has submitted to us for the co-payment amount (ex. \$10.00, \$20.00), the transaction will be processed and you will not be asked to provide us with documentation.

If you use your debit card with a health care provider for an amount other than your co-payment, you will receive an automated e-mail<sup>2</sup> request for documentation within 2 days. You will need to send us the e-mailed request and documentation which should include the name of the service provider, description of service or item provided. (A debit card receipt is not sufficient documentation). You will have two weeks to provide us with this documentation.

**Eligible:** If the documentation is found to be for an eligible expense, the Debit Card processing system will be updated and the transaction will be approved.

**Ineligible:** If the documentation is found to be for an ineligible expense, you will be notified by letter as to the reason and the amount which must be returned to your employer. That amount will be placed back into your account for a future eligible expense. If CSLLC does not receive the detailed receipt within two weeks, a second automated email will be sent to you from the Debit Card processing system. You will then have two more weeks to return the requested information to CSLLC.

If CSLLC does not receive the requested information within the two additional weeks provided, a third and final automated email will be sent to you.

You will have eight days to return the requested information. If on the eighth day, CSLLC still has not received the requested information, your Debit Card will be de-activated and you will not be able to use the card. During that time, any expenses you incur will need to be submitted for reimbursement with a Reimbursement Request form and detailed receipts for each item.

## Questions: Contact us at 1 888 227-9745 ext. 2040

**Office Hours:** Mon. - Fri. 8:00am - 4:30pm

**Extended Phone Hours:** Tues. & Thurs. 8:00am - 5:30pm

**Email:** [flexiblebenefits@combinedservices.com](mailto:flexiblebenefits@combinedservices.com) **Fax:** 1 603 224-0230

**Located at:** Two Delta Drive, Suite 301, Concord, NH

**Mailing Address:** PO Box 1320, Concord, NH 03302-1320

